Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself					
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	You	r full name					
	your	e the name that is on government-issued are identification (for	Madhupriya First name	First name			
	example, your driver's license or passport).		Middle name	Middle name			
	iden	g your picture tification to your ting with the trustee.	Dontha Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)			
2.		other names you have d in the last 8 years					
		ude your married or den names.					
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer tiffication number	xxx-xx-8888				

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 2 of 54 Case number (if known)

Debtor 1 Madhupriya Dontha

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	250 W. Schick Road Bloomingdale, IL 60108	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		DuPage County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

		Document	Page 3 of 54	
Debtor 1	Madhupriya Dontha		Case number (if known)	

ar	Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ CI	hapter 7					
		□ с	hapter 11					
		☐ CI	hapter 12					
		☐ CI	hapter 13					
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the	se check with the clerk's office in ye fee yourself, you may pay with cour behalf, your attorney may pay	cash, cashier's check, or money	
□ I need to pay the fee in installments. If you choose this option, sign and attach the Application The Filing Fee in Installments (Official Form 103A).					plication for Individuals to Pay			
						s option only if you are filing for C nly if your income is less than 150		
			applies to you	ur family size an	d you are unable to pay th	ne fee in installments). If you chooded (Official Form 103B) and file it w	ose this option, you must fill out	
Э.	Have you filed for bankruptcy within the	■ No).					
	last 8 years?	☐ Ye	es.					
			District		When	Case numb	er	
			District		When	Case numb		
			District		When	Case numb	er	
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is	☐ Ye	es.					
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor			Relationship	to you	
			District		When _	Case numbe	r, if known	
			Debtor			Relationship	to you	
			District	-	When	Case numbe	r, if known	
11.	Do you rent your residence?	■ No	Go to I	ine 12.				
		☐ Ye	es. Has yo	ur landlord obta	nined an eviction judgment	against you?		
				No. Go to line	12.			
				Yes. Fill out Initial		viction Judgment Against You (Fo	orm 101A) and file it with this	

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

Document Page 4 of 54 Case number (if known) Debtor 1 Madhupriya Dontha Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard?

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 5 of 54

Debtor 1 Madhupriya Dontha

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

Document Page 6 of 54 Case number (if known) Debtor 1 Madhupriya Dontha Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion ■ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Madhupriya Dontha Signature of Debtor 2 Madhupriya Dontha

Executed on

Signature of Debtor 1

Executed on January 2, 2018

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 7 of 54

Debtor 1 Madhupriya Dontha Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Gregory J. Martucci	Date	January 2, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Gregory J. Martucci 6185842 Printed name		
Law Office of Gregory J. Martucci, P.C.		
203 E. Irving Park Rd. Roselle, IL 60172		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	
6185842		
Bar number & State		

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

		Docume	ent Page 8 of 9	<u>54</u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	Madhupriya Dont	ha			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	<u> </u>		
Par	t1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	20,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	87,323.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	107,323.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,858.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	731,308.00
	Your total liabilities	\$	734,166.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,800.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,880.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	. family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Case 18-00045 Doc 1 Document

Page 9 of 54 Case number (if known) Debtor 1 Madhupriya Dontha

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,800.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,858.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,858.00

	Ca	se 18-00045	Doc 1	Filed 01/02/18	Entered 01/02/1	L8 16:45:56	6 De	sc M	ain	
Fill	in this inforn	nation to identify yo	ur case and							
Del	btor 1	Madhupriya Do								
Del	btor 2	First Name	Mid	dle Name	Last Name					
	ouse, if filing)	First Name	Mid	dle Name	Last Name					
Uni	ited States Ba	nkruptcy Court for the	: NORTHE	RN DISTRICT OF ILLII	NOIS					
Cas	se number _				-				Check if this is an mended filing	
_		rm 106A/B e A/B: Pro	nerty						12/15	
nfoi nsv Par	rmation. If more wer every quest tt 1: Describe	e space is needed, atta tion. Each Residence, Build nave any legal or equita	ch a separate	sheet to this form. On th	e are filing together, both are e top of any additional pages on or Have an Interest In land, or similar property?					
	J No. Go to Part Yes. Where is			What is the property	/? Check all that apply					
	3 Lots in I			Single-family l	nome				exemptions. Put	
	Street address, i	Street address, if available, or other description						amount of any secured claims on Schedule D: editors Who Have Claims Secured by Property.		
				☐ Manufactured ☐ Land	or mobile home	Current value entire propert			ent value of the on you own?	
	City	State	ZIP Code	Investment pro	operty	\$20,0	00.00		\$20,000.00	
				☐ Timeshare ☐ Other Who has an interest ☐ Debtor 1 only	in the property? Check one		imple, ten f known.		nership interest the entireties, or	
				_ Debtor 2 only Debtor 1 and						

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$20,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Page 11 of 54
Case number (if known) Document Debtor 1 Madhupriya Dontha 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Honda Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Pilot** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2004 Year: Debtor 2 only Current value of the Current value of the 128,000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: At least one of the debtors and another \$2,000.00 \$2,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,000.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ■ No ☐ Yes. Describe..... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$50.00 Old Laptop Old Camera \$5.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No

Case 18-00045

Doc 1

Filed 01/02/18

Entered 01/02/18 16:45:56

Desc Main

	Case 18-	00045	DOC 1	Document	Page 12 of 5		0.50	Desc Main
Debtor 1	Madhupriya	Dontha		Document		Case number (if	f known)	
☐ Yes.	. Describe							
□ No		othes, fur	s, leather coats	s, designer wear, shoe	s, accessories			
		Used (Clothing					\$400.00
			· · J					
■ No		welry, cos	stume jewelry, e	engagement rings, we	dding rings, heirloom je	ewelry, watches, g	gems, go	ld, silver
-	arm animals							
Exam ■ No	nples: Dogs, cats,	birds, hor	ses					
	. Describe							
14. Any o	ther personal an	d housel	nold items you	u did not already list,	including any health	aids you did no	t list	
Yes.	. Give specific in	ormation.						
		Childr		e Unit: g and Photos				
			uitcases Ilaneous Hou	usehold Items				\$150.00
for P	Part 3. Write that escribe Your Finan	number i	neres	om Part 3, including a		you have attach	hed	\$605.00 Current value of the portion you own?
								Do not deduct secured claims or exemptions.
■ No □ Yes. 17. Depos Exam	sits of money	avings, o	other financial		of deposit; shares in c	, ,	·	·
□ No				Institution	name:			
- res.					erican Bank			
		17.1.	Checking	Bloomin #	gdale, IL			\$0.00
			-	Fifth Thi	rd Bank gdale, IL			
		17.2.	Checking	#	gaalo, IL			\$15.00
			_	Chase B Bloomin	ank gdale, IL			
		17.3.	Savings	#				\$5.00

Official Form 106A/B Schedule A/B: Property

page 3

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 13 of 54 Case number (if known) Case number (if known)

18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts								
	■ No □ Yes Institution or issuer	name:						
19.	Non-publicly traded stock and interests in incorporation to venture	prated and unincorporated businesses, including an interest in a	an LLC, partnership, and					
	Yes. Give specific information about them	 % of ownership:						
20.	Government and corporate bonds and other nego Negotiable instruments include personal checks, cas Non-negotiable instruments are those you cannot tra	hiers' checks, promissory notes, and money orders.						
	☐ Yes. Give specific information about them Issuer name:							
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 4 □ No	03(b), thrift savings accounts, or other pension or profit-sharing plans	S					
	Yes. List each account separately. Type of account:	Institution name:						
	401(k)	Chase P.O. Box 419784 Kansas City, MO 64141	\$75,298.00					
	401(k)	Fidelity P.O. Box 770001 Cincinnati, OH 45277	\$8,000.00					
22.		that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, Institution name or individual:	or others					
	Rental deposit	Security Deposit for Apartment	\$100.00					
	Annuities (A contract for a periodic payment of mone No ☐ Yes	ey to you, either for life or for a number of years) ualified ABLE program, or under a qualified state tuition prograr	n.					
	■ No	n. Separately file the records of any interests.11 U.S.C. § 521(c):						
25.	Trusts, equitable or future interests in property (o	ther than anything listed in line 1), and rights or powers exercisa	able for your benefit					
	Yes. Give specific information about them							
26.	Patents, copyrights, trademarks, trade secrets, an Examples: Internet domain names, websites, proceed No □ Yes. Give specific information about them							
27.	Licenses, franchises, and other general intangible	es erative association holdings, liquor licenses, professional licenses						

Debtor 1

	Case 18-00045	Doc 1	Filed 01/02/18		2/18 16:45:56	Desc Main		
Debtor 1	Madhupriya Dontha		Document	Page 14 of 54 _c	Case number (if known)			
☐ Yes	s. Give specific information a	bout them						
Money o	r property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.		
■ No	efunds owed to you s. Give specific information ab	pout them, in	cluding whether you alre	ady filed the returns an	d the tax years			
Exan □ No -	ly support mples: Past due or lump sum s. Give specific information		usal support, child suppo	ort, maintenance, divord	e settlement, property	settlement		
			nony Recieved from	Ex-Husband]			
			Prasantha Dontha 1188 Burnham Stree Carol Stream, IL 60		Alimony	\$1,300.00		
■ No □ Yes	 ☐ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance 							
		pany name:		Beneficiar	y:	Surrender or refund value:		
If you some	nterest in property that is duare the beneficiary of a livin eone has died. s. Give specific information				surrently entitled to rece	eive property because		
 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim 								
■ No	34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No □ Yes. Describe each claim							
35. Any f ■ No	financial assets you did not s. Give specific information	already list						
	I the dollar value of all of yo Part 4. Write that number he					\$84,718.00		
Part 5: D	Describe Any Business-Related	Property You	Own or Have an Interest	In. List any real estate in	Part 1.			
37. Do yo u	u own or have any legal or equi	table interest	in any business-related p	roperty?				

Official Form 106A/B Schedule A/B: Property page 5

No. Go to Part 6.

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Page 15 of 54
Case number (if known) Document Debtor 1 Madhupriya Dontha ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$20,000.00 Part 2: Total vehicles, line 5 \$2,000.00 56. Part 3: Total personal and household items, line 15 57. \$605.00 58. Part 4: Total financial assets, line 36 \$84,718.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$87,323.00 Copy personal property total \$87,323.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$107,323.00

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

		I A A A HIII.		/	
Fill in this inform	ation to identify your	case:			
Debtor 1	Madhupriya Dont	ha			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if t
					amended

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	u Claim a	s Exempt
---------	----------	---------	-----------	-----------	----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	The state of the s		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
2004 Honda Pilot 128,000 miles	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(c)	
Line Holli Schedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit		
Old Laptop Line from Schedule A/B: 7.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)	
Line Holli Schedule Arb. 1.1			100% of fair market value, up to any applicable statutory limit		
Old Camera	\$5.00		\$5.00	735 ILCS 5/12-1001(b)	
Life from Schedule PAB. 1.2			100% of fair market value, up to any applicable statutory limit		
Used Clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)	
Line IIIIII Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
Property in Storage Unit: Childrens' Clothing and Photos	\$150.00		\$150.00	735 ILCS 5/12-1001(b)	
Old Suitcases Miscellaneous Household Items Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit		

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 17 of 54

Dept	or 1 Madnupriya Dontna			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
;	Checking: Fifth Third Bank Bloomingdale, IL # Line from <i>Schedule A/B</i> : 17.2	\$15.00	■	\$15.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
;	Savings: Chase Bank Bloomingdale, IL # Line from Schedule A/B: 17.3	\$5.00		\$5.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	401(k): Chase P.O. Box 419784 Kansas City, MO 64141 Line from Schedule A/B: 21.1	\$75,298.00		\$75,298.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
	401(k): Fidelity P.O. Box 770001 Cincinnati, OH 45277 Line from Schedule A/B: 21.2	\$8,000.00		\$8,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
	Rental deposit: Security Deposit for Apartment Line from Schedule A/B: 22.1	\$100.00	■	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
!	Alimony: Alimony Recieved from Ex-Husband Prasantha Dontha 1188 Burnham Street Carol Stream, IL 60188 Line from Schedule A/B: 29.1	\$1,300.00		\$1,300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(g)(4)
	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covers No Yes	3 years after that for ca	ases fi	,	,

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 18 of 54

Fill in this information to identify your case:							
Debtor 1	Madhupriya Dont	ha					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: NORTHERN			OF ILLINOIS				
Case number							
(if known)					☐ Check if this is an		
					amended filing		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

			Document	Page 19 of	54		
Fill	in this inform	nation to identify your cas	se:				
Deb	otor 1	Madhupriya Dontha					
		First Name	Middle Name	Last Name			
	otor 2 use if, filing)	First Name	Middle Name	Last Name			
	-						
Unit	ted States Bar	nkruptcy Court for the: N	IORTHERN DISTRICT OF IL	LINOIS			
Cas	se number						
(if kn	own)					_	if this is an
						amend	ed filing
Off	icial Form	106E/F					
			o Have Unsecured	l Claims			12/15
			art 1 for creditors with PRIORI		or creditors with NON	PRIORITY claims. Li	
Sche eft. A name	edule D: Credito Attach the Cont e and case num	ors Who Have Claims Secure tinuation Page to this page. I nber (if known).	I Leases (Official Form 106G). d by Property. If more space is f you have no information to re	needed, copy the Par	t you need, fill it out,	number the entries ir	the boxes on the
		I of Your PRIORITY Unse					
	No. Go to Pa	rs have priority unsecured c	aims against you?				
	■ Yes.	ail 2.					
	identify what typ possible, list the Part 1. If more t	be of claim it is. If a claim has be claims in alphabetical order a han one creditor holds a partic	a creditor has more than one pri oth priority and nonpriority amou ccording to the creditor's name. I ular claim, list the other creditors the instructions for this form in th	nts, list that claim here a If you have more than tw in Part 3.	and show both priority a	nd nonpriority amount	s. As much as
		,		·	Total claim	Priority amount	Nonpriority amount
2.1	DuPage	County Collector	Last 4 digits of acco	unt number	Unknown	\$0.00	\$0.00
	421 N. C	editor's Name County Farm Road n, IL 60187	When was the debt i	ncurred?		-	
		reet City State Zlp Code	As of the date you fil	e, the claim is: Check	all that apply		
	Who incurred	I the debt? Check one.	☐ Contingent				
	Debtor 1 o	nly	☐ Unliquidated				
	Debtor 2 o	nly	☐ Disputed				
	Debtor 1 a	nd Debtor 2 only	Type of PRIORITY ur	nsecured claim:			
	At least on	e of the debtors and another	☐ Domestic support of	obligations			
	☐ Check if tl	his claim is for a community	debt Taxes and certain	other debts you owe the	government		
	Is the claim s	ubject to offset?	☐ Claims for death o	r personal injury while yo	ou were intoxicated		
	■ No		Other. Specify				
	Yes		P 1	teal Estate Taxes Property Located a 188 Burnham Stre Parol Stream, IL 6	nt: eet	rough 2017 for	

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 20 of 54

Debtor 1 Madhupriya Dontha Case number (if know) 2.2 Last 4 digits of account number \$606.00 \$0.00 Illinois Department of Revenue \$606.00 Priority Creditor's Name P.O. Box 64338 When was the debt incurred? Chicago, IL 60664 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt $oxedsymbol{\square}$ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes **2013 Taxes** 2.3 Illinois Department of Revenue \$88.00 \$88.00 \$0.00 Last 4 digits of account number Priority Creditor's Name P.O. Box 64338 When was the debt incurred? Chicago, IL 60664 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt ■ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify **2012 Taxes** ☐ Yes 2.4 Last 4 digits of account number \$2,164.00 \$2,164.00 \$0.00 Priority Creditor's Name When was the debt incurred? P.O. Box 7346 Philadelphia, PA 19101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify

☐ Yes

2016 Taxes Due

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 21_of 54

Debtor 1 Madhupriya Dontha	Case number (if know)	
2.5 IRS	Last 4 digits of account number \$0.00 \$	50.00 \$0.00
Priority Creditor's Name Mail Stop 5014CHI 230 S. Dearborn Street, Room 2600	When was the debt incurred?	
Chicago, IL 60604		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
■ Debtor 1 only	☐ Unliquidated	
☐ Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Domestic support obligations	
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
■ No	☐ Other. Specify	
Yes	Notice Only	
Part 2: List All of Your NONPRIORITY Unsecu	ured Claims	
3. Do any creditors have nonpriority unsecured claim	ns against you?	
\square No. You have nothing to report in this part. Submit	this form to the court with your other schedules.	
■ Yes.		
unsecured claim, list the creditor separately for each c	e alphabetical order of the creditor who holds each claim. If a creditor has more that claim. For each claim listed, identify what type of claim it is. Do not list claims already income creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
		Total claim
4.1 American Express	Last 4 digits of account number	\$3,562.00
Nonpriority Creditor's Name P.O. Box 0001	When was the debt incurred?	
Los Angeles, CA 90096	When was the dept incurred:	-
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
☐ Yes	■ Other. Specify Credit Card Purchases	_

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 22 of 54
Case number (if know)

DCDI	iliaunupnya Donuna	Odsc Humber (II know)	
4.2	Bank of America	Last 4 digits of account number	\$5,867.00
	Nonpriority Creditor's Name P.O. Box 15019 Wilmington, DE 19886	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	. ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.3	Bank of America	Last 4 digits of account number	\$4,304.00
	Nonpriority Creditor's Name P.O. Box 15019 Wilmington DE 10896	When was the debt incurred?	
	Wilmington, DE 19886 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.4	Bloomingdalen Fire Protection	Last 4 digits of account number	\$909.00
	Nonpriority Creditor's Name		***********
	Disctrict No. 1 P.O. Bo 457	When was the debt incurred?	
	Wheeling, IL 60090		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Ambulance	

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 23 of 54

1 Madhupriya Dontha	Case number (if know)	
Capital One Bank	Last 4 digits of account number	\$8,883.00
Nonpriority Creditor's Name P.O. Box 30281 Solt Lake City LIT 84130	When was the debt incurred?	
Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card Purchases	
Chase Bank	Last 4 digits of account number	\$9,778.00
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 15298 Wilmington, DE 19850	when was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card Purchases	
Discover	Last 4 digits of account number	\$5,318.00
Nonpriority Creditor's Name P.O. Box 6103	When was the debt incurred?	
Carol Stream, IL 60197	Their was the dest mounted:	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit Card Purchases	

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 24 of 54 Case number (if know)

4.8	DuPage Medical Group	Last 4 digits of account number	\$49.00
	Nonpriority Creditor's Name 15921 Collections Center Drive Chicago, IL 60693	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Medical Bill	
4.9	Healthlab	Last 4 digits of account number	\$113.00
	Nonpriority Creditor's Name P.O. Box 4090	When was the debt incurred?	
	Carol Stream. IL 60197		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bill	
4.1	Law Office of Trent & Butcher	Lant A dimite of account number	\$75,135.00
0	Nonpriority Creditor's Name	Last 4 digits of account number	ψ7 3,133.00
	350 S. Schmale Rd #130	When was the debt incurred?	
	Carol Stream, IL 60188		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	— INO	_ Legal Fees	
	Yes	Other. Specify 12-D-1742	

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 25 of 54
Case number (if know)

4.1	Mayarah Law Office		¢2 620 00
1	Mevorah Law Office Nonpriority Creditor's Name	Last 4 digits of account number	\$3,630.00
	134 N. Bloomingdale Road	When was the debt incurred?	
	Bloomingdale, IL 60108 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Legal Fees	
4.1	Miramed Revenue Group		\$1,753.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	ψ1,733.00
	991 Oak Creek Dr.	When was the debt incurred?	
	Lombard, IL 60148 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collector for Glen Oaks Hospital	
4.1	Northwestern Medicine	Last 4 digits of account number Various	\$400.00
3	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ-100.00
	P.O. Box 4090	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or the date you may the stain for one of an area appry	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bill	

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 26 of 54 Case number (if know)

CDI	Mauriupriya Donuia		
.1	Prasantha Dontha	Last 4 digits of account number	\$187,050.00
	Nonpriority Creditor's Name 1188 Burnham Street	When was the debt incurred?	
	Carol Stream, IL 60188 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Money Owed to Ex-Husband	
.1	Ray Ramos	Last 4 digits of account number	\$3,000.00
	Nonpriority Creditor's Name		*-,
	1529 Allen Lan e	When was the debt incurred?	
	Saint Charles, IL 60174 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Money Owed for Unpaid Rent	
.1	State Collection Service, Inc.	Last 4 digits of account number Various	\$1,171.00
i	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,171.00
	2509 S. Stoughton Road	When was the debt incurred?	
	Madison, WI 53716 Number Street City State Zlp Code	As of the date year file the eleips in Cheek all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other, Specify Collector for Medical Bills	

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 27 of 54

Debio	Madnupriya Dontha	Case number (if know)	
4.1 7	Suburban Radiologists S.C.	Last 4 digits of account number	\$51.00
	Nonpriority Creditor's Name 1446 Momentum Place Chicago, IL 60689	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bill	
4.1	Wells Fargo Home Mortgage	Last 4 digits of account number	\$420,315.00
	Nonpriority Creditor's Name P.O. Box 5296 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Foreclosure on Property Located at: 1188 Burnham Street Carol Stream, IL 60188	
4.1	Winfield Laboratory Consultants. SC	Last 4 digits of account number	\$20.00
	Nonpriority Creditor's Name Dept. 4408	When was the debt incurred?	
	Carol Stream, IL 60122 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Medical Bill	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 28 of 54

Debtor 1 Madhupriya Dontha		Case number (if know)	
Name and Address Blitt & Gaines, P.C.	On which entry in Part 1 or Part 2 d Line 4.5 of (<i>Check one</i>):	id you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims	
661 Glenn Ave.	Line 4.0 of (Check one).	,	
Wheeling, IL 60090		■ Part 2: Creditors with Nonpriority Unsecured Claims	
. ,	Last 4 digits of account number	R528	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Blitt & Gaines, P.C.	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
661 Glenn Ave. Wheeling, IL 60090		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Wilcomig, in 00000	Last 4 digits of account number	1511	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Kurstufek & Associates	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
1121 Warren Ave., Ste. 210 Downers Grove, IL 60515		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Downers Grove, in 00313	Last 4 digits of account number	2018	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
McCalla Raymer Leibert Pierce, LLC	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
1 N. Dearborn St., Ste. 1200 Chicago, IL 60602		■ Part 2: Creditors with Nonpriority Unsecured Claims	
omeago, in oboon	Last 4 digits of account number	2025	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Michael R. Konewko	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
29 W. 204 Roosevelt Road West Chicago, IL 60185		■ Part 2: Creditors with Nonpriority Unsecured Claims	
West Gilleago, IL 00103	Last 4 digits of account number	1742	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Pierce & Associates	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
1 N. Dearborn, Ste. 1300 Chicago, IL 60602		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Officago, IL 00002	Last 4 digits of account number	2025	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2,858.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2,858.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	731,308.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	731,308.00

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

		17000000	111 FAUE 7.3 UL 34	
Fill in this infor	mation to identify your	case:		
Debtor 1	Madhupriya Dont	ha		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the , Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

		Docume	nt Page 30 of	54	_
Fill in thi	s information to identify your				
Debtor 1	Madhupriya Dont	ha			
20010	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nun	nher				
(if known)					☐ Check if this is an
					amended filing
○ ff: ~: ~	J Comm 10011				
	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
ill it out, a vour nam 1. Do No Ye 2. Wi Arizo No Ye 3. In Co in lin Form	and number the entries in the e and case number (if known) by you have any codebtors? (If you have any codebtors? (If you have any codebtors, have you ha, California, Idaho, Louisiana, b. Go to line 3. Is. Did your spouse, former spoulumn 1, list all of your codebte 2 again as a codebtor only in the example.	boxes on the left. Attach. Answer every question you are filing a joint case, or lived in a community proversed Newada, New Mexico, Purese, or legal equivalent lived ors. Do not include your fithat person is a guaran	the Additional Page to to. do not list either spouse as operty state or territory? erto Rico, Texas, Washing with you at the time? spouse as a codebtor if tor or cosigner. Make su	this page. On the to s a codebtor. (Community proper gton, and Wisconsin.	
	Column 1: Your codebtor	D.O. d.			editor to whom you owe the debt
	Name, Number, Street, City, State and ZI	r Code		Check all schedu	les that apply:
3.1	Prasantha K. Dontha 1188 Burnham Street Carol Stream, IL 60188			☐ Schedule D, ■ Schedule E/F ☐ Schedule G _ Wells Fargo Ho	F, line 4.18
3.2	Prasantha K. Dontha 1188 Burnham Street Carol Stream, IL 60188			☐ Schedule D, ■ Schedule E/F ☐ Schedule G _ DuPage County	F, line 2.1

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 31 of 54

							_				
	in this information to identify										
Dei	btor 1 <u>Madhu</u>	priya	Dontha			_					
	btor 2 Duse, if filing)					_					
Uni	ited States Bankruptcy Court f	for the:	NORTHERN DISTRIC	T OF ILLINOIS		_					
Cas	se number						Chec	k if this is	:		
(If kr	nown)							n amende	Ū		
_										ng postpetition ollowing date:	
<u>O</u>	fficial Form 106l						N	/IM / DD/ \	YYYY		
S	chedule I: Your	Inco	ome								12/1
spo atta	plying correct information. use. If you are separated and a separate sheet to this for the describe Employers.	d you form. (r spouse is not filing wi	th you, do not incl	ude inforr	nat	ion abou	t your spe	ouse. If m	ore space is	needed,
1.	Fill in your employment information.			Debtor 1				Debtor 2	2 or non-f	iling spouse	
	If you have more than one j		Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional employers.		Employment status	☐ Not employed				☐ Not e	mployed		
			Occupation	Unemployed							
	Include part-time, seasonal, self-employed work.	or	Employer's name	-							
	Occupation may include stu or homemaker, if it applies.	dent	Employer's address								
			How long employed th	nere?				_			
Pai	rt 2: Give Details Abou	ıt Mon	thly Income								
spoi	imate monthly income as of use unless you are separated or your non-filing spouse ha		,	·	·		·			·	J
	e space, attach a separate sh			mbine the imornation	on for all c	·πρ	10,013 101	triat perso		ines below. II	you need
							For Del	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages deductions). If not paid more	,			2.	9	S	0.00	\$	N/A	-
3.	Estimate and list monthly	overti	me pay.		3.	+\$	S	0.00	+\$	N/A	-
4.	Calculate gross Income.	Add lin	e 2 + line 3.		4.	9	3	0.00	\$	N/A	

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 32 of 54

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Symmetry of Schedules and Statistical Symmetry of Cortain Liabilities and Related Data if it	Deb	tor 1	Madhupriya Dontha	-	Ca	ase number (if kn	own)				
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Social Security 5c. Voluntary contributions for retirement plans 5c. Social Security 5c. Voluntary contributions for retirement plans 5c. Social Security 5c. Soc					F	For Debtor 1					
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. So. 0.00 \$ N/A 5c. Required repayments of retirement fund loans 5c. So. 0.00 \$ N/A 5c. Insurance 5c. So. 0.00 \$ N/A 5c. Other deductions. Specify: 5c. So. 0.00 \$ N/A 5c. Other deductions. Add lines 5a+5b+5c+5d+5g+5g+5h. 6. \$ 0.00 \$ N/A 5c. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 5c. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 5c. List all other income regularly received: 5c. So. 0.00 \$ N/A 5c. List all other income regularly received: 5c. So. 0.00 \$ N/A 5c. Family support payments that you, a non-filling spouse, or a dependent regularly receive 5c. So. 0.00 \$ N/A		Cop	by line 4 here	4.	\$. 0	.00	\$		N/A	\
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. So. 0.00 \$ N/A 5c. Required repayments of retirement fund loans 5c. So. 0.00 \$ N/A 5c. Insurance 5c. So. 0.00 \$ N/A 5c. Other deductions. Specify: 5c. So. 0.00 \$ N/A 5c. Other deductions. Add lines 5a+5b+5c+5d+5g+5g+5h. 6. \$ 0.00 \$ N/A 5c. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 5c. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 5c. List all other income regularly received: 5c. So. 0.00 \$ N/A 5c. List all other income regularly received: 5c. So. 0.00 \$ N/A 5c. Family support payments that you, a non-filling spouse, or a dependent regularly receive 5c. So. 0.00 \$ N/A	5.	List	all payroll deductions:								
55. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. So. 0.00 \$ N/A 5d. Densetic support obligations 5d. So. 0.00 \$ N/A 5d. Densetic support obligations 5d. So. 0.00 \$ N/A 5d. Densetic support obligations 5d. So. 0.00 \$ N/A 5d. Other deductions. Specify: 5h. Volunt dues 5d. Volunt dues 5d. Other deductions. Specify: 5h. Volunt dues 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8L. List all other income regularly received: 8p. Nets income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 1,300.00 \$ N/A 8c. Scala Security 8c. So. 0.00 \$ N/A 8c. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Program) or housing subsidies. 8p. Specify: 8p. Other government assistance that you regularly receive land due cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Program) or housing subsidies. 8p. Specify: 8p. Pension or retirement income 8p. Other monthly income. Specify: Contribution from Parents 8p. Pension or tetirement income 8	٥.		• •	5a	¢		00	\$		N/A	
Sc. Voluntary contributions for retirement plans Sc. S. 0.00 S. N/A			·								_
5d. Required repayments of retirement fund loans 5e. Insurance 5e. \$ 0.000 \$ N/A 5f. Domestic support obligations 5f. \$ 0.000 \$ N/A 5g. Union dues 5h. Other deductions. Specify: 5h. \$ 0.000 \$ N/A 5h. Other deductions. Specify: 5h. \$ 0.000 \$ N/A 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 6. Add the income from rental property and form operating a business, purposition of the rental property and from operating a business, purposition of the rental property and property and the total monthly net income. 6. But increase and increase and the form operating a business showing gross receipts, ordinary and necessary business expenses, and the total monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 8. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 11. S			·					· -			_
5f. Domestic support obligations 5f. \$ 0.00 \$ N/A		5d.		5d.	\$			\$			_
5g. Union dues 5g. Union dues 5g. Union dues 5g. \$ 0.00 \$ N/A 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Not income from ental property and business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimory, spousal support, child support, maintenance, divorce settlement, and properly settlement. 8c. S 1,300.00 \$ N/A 8c. Scala Security 8c. \$ 0.00 \$ N/A 8c. \$ 0.00 \$ N/A 8c. Scala Security 8c. Scala Security 8c. Scala Security 8c. Scala Sec		5e.	Insurance	5e.	\$	0	.00	\$		N/A	
5h. Other deductions. Specify: 5h. 4 \$ 0.00		5f.	Domestic support obligations	5f.	\$	0	.00	\$		N/A	<u> </u>
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5l+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensy settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (therefore) and the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: Contribution from Parents 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,800.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,800.00 \$ N/A 11. **State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarrised partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies of the summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies and Related Data, if it applies and Related Data, if it applies and Related Data, if it appli		5g.		5g.				· -			
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8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8. Descripts, ordinary and necessary business expenses, and the total monthly net income. 8. Descripts, ordinary and necessary business expenses, and the total monthly net income. 8. Descripts, ordinary and necessary business expenses, and the total monthly net income. 8. Descripts, ordinary and necessary business expenses, and the total monthly net income. 8. Descripts ordinary and necessary business expenses, and the total monthly net income. 8. Descripts ordinary receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8. Descripts ordinary settlement income inc	6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0	.00	\$		N/A	<u>\</u>
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8h. Other monthly income. Specify: Contribution from Parents 8h. \$ 500.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,800.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income. Combined monthly income. Do you expect an increase or decrease within the year after you file this form?			Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.							
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Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?	10	Cal	culate monthly income. Add line 7 + line 9	10 \$	S.	1 800 00	+ \$		Ν/Δ	= \$	1 800 00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?						1,000.00	-			* -	1,000.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{1,800.}{\text{Combined}}\$ 13. Do you expect an increase or decrease within the year after you file this form?	11.	State Included the other Double	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your price friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	deper							0.00
13. Do you expect an increase or decrease within the year after you file this form?	12.	Writ	e that amount on the Summary of Schedules and Statistical Summary of Certain						12.	\$	1,800.00
■ No.	13.	Do		?					·		
Voc Evolain:											

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 33 of 54

Filli	in this information to identify your case:				
Debt	otor 1 Madhupriya Dontha		Che	ck if this is:	
Debt (Spo				An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
` '	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING	OIS		MM / DD / YYYY	
	e number			, 22 , 1111	
	nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this f mber (if known). Answer every question.				
Part	t 1: Describe Your Household Is this a joint case?				
١.	■ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	hold of Deb	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					☐ Yes
					□ No
				_	Yes
					□ No
3.	Do your expenses include				☐ Yes
0.	expenses of people other than yourself and your dependents?				
Esti exp	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your senses as of a date after the bankruptcy is filed. If this is a suppliciable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$.	900.00
	If not included in line 4:				
	4a. Real estate taxes		4a. S	§	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c. \$ 4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hor	me equity loans	4a. 3 5. 3	·	0.00

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 34 of 54

Debtor 1	Madhupriya Dontha	Case num	ber (if known)	
. Utilit	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	50.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.	·	400.00
	d and nousekeeping supplies dcare and children's education costs	7. 8.	\$	
_		9.	·	0.00
	hing, laundry, and dry cleaning		\$	40.00
	sonal care products and services	10.	\$	75.00
	ical and dental expenses	11.	\$	38.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	200.00
	not include car payments.	13.		
	ertainment, clubs, recreation, newspapers, magazines, and books			0.00
	ritable contributions and religious donations	14.	Φ	0.00
5. Insu				
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	150	¢	0.00
		15a.	·	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.		125.00
	Other insurance. Specify:	15d.	\$	0.00
_	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		_	
Spec	· ·	16.	\$	0.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify: Storage Unit	17c.	\$	52.00
	Other. Specify:	17d.	\$	0.00
3. You	r payments of alimony, maintenance, and support that you did not report as	3		
dedu	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
Θ . Other	er payments you make to support others who do not live with you.		\$	0.00
Spec	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on School	edule I: Yo	ur Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.		0.00
. Othe	er: Specify:	21.	Τ Φ	0.00
2. Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	1,880.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$.,300.00
				4 000 00
22C.	Add line 22a and 22b. The result is your monthly expenses.		\$	1,880.00
3. Calc	culate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,800.00
	Copy your monthly expenses from line 22c above.	23b.		1,880.00
_00.	Japa Jam Horning Oxportoco Harri into LLO abovo.	200.		1,000.00
230	Subtract your monthly expenses from your monthly income.			
200.	The result is your <i>monthly net income</i> .	23c.	\$	-80.00
	saak .a your monday not moonto.		<u> </u>	
4. Do v	ou expect an increase or decrease in your expenses within the year after you	ou file this	form?	
	example, do you expect to finish paying for your car loan within the year or do you expect you			or decrease because of
roi e				
	fication to the terms of your mortgage?			

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 35 of 54

Fill in this info	rmation to identify your	case:			
Debtor 1	Madhupriya Dont				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For		ın Individual	Debtor's So	chedules	12/15
					.2.13
You must file the	nis form whenever you fi	n connection with a banl	s or amended schedule	s. Making a false state	ment, concealing property, or 0, or imprisonment for up to 20
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
□ Yes.	Name of person			Attach Bank	ruptcy Petition Preparer's Notice.
Under pen	·	that I have read the sum	mary and schedules fil	Declaration,	and Signature (Official Form 119)
•					
	dhupriya Dontha		X		
	upriya Dontha ure of Debtor 1		Signature of	of Debtor 2	

Date

Date January 2, 2018

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 36 of 54

Fill	in this inforn	nation to identify your	case:								
	otor 1	Madhupriya Don									
		First Name	Middle Name	Last Name							
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name							
Uni	ted States Bar										
	se number					☐ Check if this is an amended filing					
Sta Be a info	as complete a rmation. If m	of Financial A	attach a separate sheet to	are filing together, both are	Bankruptcy equally responsible for su by additional pages, write yo						
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before							
1.	What is your	current marital statu	s?								
	☐ Married■ Not mar	ried									
2.	During the la	ing the last 3 years, have you lived anywhere other than where you live now?									
	□ No ■ Yes. Lis	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there					
		Kerry Court From-To: ol Stream, IL 60188 10/2014 - 10/2			Same as Debtor 1						
	es and territori ■ No □ Yes. Ma	es include Arizona, Cal	ifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto F	nity property state or territo lico, Texas, Washington and						
Par	Explai	n the Sources of Your	псоте								
4.	Fill in the tota	I amount of income you	ployment or from operating received from all jobs and a have income that you receive	all businesses, including par		endar years?					
	■ No										
	☐ Yes. Fill	in the details.									
		Debtor 1 Debtor 2			Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document

Page 37 of 54 Case number (if known) Debtor 1 Madhupriya Dontha

5.	Did you receive any other income during this year or the two previous calendar years?
	Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment
	and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery
	winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

Ш	N	0
---	---	---

Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Alimony / Maintenance	\$1,300.00		
	Gift from Parents	\$500.00		
For last calendar year: (January 1 to December 31, 2017)	Alimony / Maintenance	\$15,600.00		
	Gift from Parents	\$6,000.00		
For the calendar year before that: (January 1 to December 31, 2016)	Alimony / Maintenance	\$15,600.00		
	Gift from Parents	\$6,000.00		
	401K Withdrawal	\$4,985.00		

List Certain Payments You Made Before You Filed for Bankruptcy

ì.	Are either	Debtor 1's o	r Debtor 2's	debts	primarily	consumer	debts?
----	------------	--------------	--------------	-------	-----------	----------	--------

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

l _{No.}	Go to	line 7	
· INO.	00.0	111110 /	٠

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do

not include payments to an attorney for this bankruptcy case.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount	Amount you	Was this payment for
		paid	still owe	

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 38 of 54 Case number (if known)

Within 1 year before you filed for bankru Insiders include your relatives; any general of which you are an officer, director, persor a business you operate as a sole proprieto alimony.	I partners; relatives of any gen in control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a genera ny managing a	al partner; corporation gent, including one fo
■ No					
☐ Yes. List all payments to an insider.					
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Within 1 year before you filed for bankruinsider?	uptcy, did you make any pa	ayments or transfer a	iny property on a	eccount of a de	ebt that benefited ar
Include payments on debts guaranteed or	cosigned by an insider.				
■ No					
☐ Yes. List all payments to an insider					
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
		P			
rt 4: Identify Legal Actions, Repossess	sions, and Foreciosures				
Within 1 year before you filed for bankru List all such matters, including personal inj modifications, and contract disputes. No					
Yes. Fill in the details.	Nature of the same	Count on onemous		Ctatus of the	
Case title Case number	Nature of the case	Court or agency		Status of th	e case
Wells Fargo Bank	Foreclosure	Circuit Court o	f DuPage	Pending	
v. Madhupriya Dontha Prasantha Dontha 14-CH-2025		County 505 N. County Wheaton, IL 60		☐ On appe ☐ Conclud	
Capitol One	Suit for Money	Circuit Court o	f DuPage	Pending	
v. Madhupriya Dontha		County 505 N. County	Farm Road	☐ On appe	
17-SR-528		Wheaton, IL 60		☐ Conclud	ed
Raymond Ramos	Forcible Entry &	Circuit Court o	f DuPage	☐ Pending	
V.	Detainer	County		☐ On appe	al
Madhupriya Dontha 16-LM-2018		505 N. County Wheaton, IL 60		Conclud	ed
Discover Bank	Suit for Money	Circuit Court o	f DuPage	☐ Pending	
V.	•	County	_	☐ On appe	
Madhupriy Dontha 16-SR-1511		505 N. County Wheaton, IL 60		☐ Conclud	ed
				Dismissed	I
Within 1 year before you filed for bankru Check all that apply and fill in the details be		perty repossessed, f	oreclosed, garni	shed, attached	I, seized, or levied?
No. Go to line 11.					
Yes. Fill in the information below.	Describe the D		В.		M-L.
Creditor Name and Address	Describe the Property		Date		Value of the property
	Evolain what hannen	ed			

Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Case 18-00045

Page 39 of 54
Case number (if known) Document Debtor 1 Madhupriya Dontha

	Creditor Name and Address	De	escribe the Property	Date	Value of the property
		E	cplain what happened		P P
	Wells Fargo Home Mortgage P.O. Box 5296 Carol Stream, IL 60197	Fo 11	oreclosure on Property Located at: 188 Burnham Street arol Stream, IL 60188		Unknown
			Property was repossessed.		
			Property was repossessed.		
			Property was foreclosed. Property was garnished.		
			, , ,		
			Property was attached, seized or levied.		
	 11. Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details. 		did any creditor, including a bank or financial insequence you owed a debt?	stitution, set off any	amounts from your
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
Par	court-appointed receiver, a custodian, o ■ No □ Yes List Certain Gifts and Contribution		ner official?		
13.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	I			
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or or	• •	did you give any gifts or contributions with a totation	Il value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	total	Describe what you contributed	Dates you contributed	Value
Par	6: List Certain Losses				
15.		iptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and	Descr	ribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Includ	e the amount that insurance has paid. List pending	loss	lost
			ince claims on line 33 of Schedule A/B: Property.		

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main

Debtor 1 Madhupriya Dontha Page 40 of 54
Case number (if known)

Pai	t7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, d consulted about seeking bankruptcy or prepari Include any attorneys, bankruptcy petition preparer	ng a bankruptcy petition?		, ,	rty to anyone you
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Law Office of Gregory J. Martucci 203 E. Irving Park Road Roselle, IL 60172	Attorney Fees + Costs		12/29/17	\$300.00
17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors on Do not include any payment or transfer that you list No Yes. Fill in the details.	or to make payments to your creditors		r transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin include both outright transfers and transfers made include gifts and transfers that you have already list. No Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred		any property or received or debts change	Date transfer was made
	Prasantha K. Dontha 1188 Burnham St. Carol Stream, IL 60188	Debtor Quit-Claimed interest property at 1188 Burnham St., Carol Stream, IL 60188 to ex-husband.	Nothing - foreclosu	house is in ire.	10/31/17
	Ex-husband				
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect No		elf-settled tru	st or similar device	of which you are a
	Yes. Fill in the details. Name of trust	Description and value of the prope	arty transform	ad	Date Transfer was
	Hame of trust	bescription and value of the prope	ary transient	-u	made

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Page 41 of 54
Case number (if known) Document

Debtor 1 Madhupriya Dontha

Pai	rt 8: List of Certain Financial Accounts, Ins	struments,	Safe Depos	it Boxes, and	Storage Uni	ts	
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, association of the same of the sa	or other fina	ncial accou	ints; certificate	es of depos		,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 dig account n		Type of accinstrument	ount or	Date account was closed, sold, moved, or transferred	Last balanc before closing o transfe
21.	Do you now have, or did you have within 1 yeash, or other valuables? No Yes. Fill in the details.	ear before	you filed fo	r bankruptcy,	any safe de	posit box or other deposi	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Addr	else had ac ess (Number, s		Describe	the contents	Do you still have it?
	First American Bank 80 Stratford Dr. Bloomingdale, IL 60108	Debt	or		parents Subhad Plot No. [Near B- Kurnool Pradesh	on loan from debtor's , Subbarayudu & ramma Duggisetty, . 9, Journalist Colony -Camp Post Office], I - 518002, Andhra	□ No ■ Yes
22.	Have you stored property in a storage unit of	or place oth	er than you	r home within	1 year befo	re you filed for bankrupto	y?
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	else has or ess (Number, 3 nd ZIP Code)	had access Street, City,	Describe	the contents	Do you still have it?
Pa	rt 9: Identify Property You Hold or Control	for Someo	ne Else				
23.	Do you hold or control any property that so for someone.	meone else	owns? Incl	ude any propo	erty you bor	rowed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.						

Part 10: Give Details About Environmental Information

Address (Number, Street, City, State and ZIP Code)

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

Describe the property

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Where is the property?

(Number, Street, City, State and ZIP

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Owner's Name

Value

Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Case 18-00045 Page 42 of 54 Case number (if known) Document

Debtor 1 **Madhupriya Dontha**

24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any No	release of hazardous material?		
	Yes. Fill in the details.			5
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any envir	onmental law? Include settlements a	nd orders.
	No No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t11: Give Details About Your Business or Con	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	/ (LLC) or limited liability partnership	o (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	tive of a corporation		
	☐ An owner of at least 5% of the voting or	r equity securities of a corporation		
	■ No. None of the above applies. Go to Part	12.		
	☐ Yes. Check all that apply above and fill in t	the details below for each business.		
	Business Name De Address	escribe the nature of the business	Employer Identification number Do not include Social Security r	
		ame of accountant or bookkeeper	ŕ	iumber of friit.
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statement to	Dates business existed anyone about your business? Inclu	de all financial
	■ No			
	Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued		

Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Case 18-00045 Page 43 of 54
Case number (if known) Document

Debtor 1 Madhupriya Dontha

are true and correct. I understand t	ment of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers transfer making a false statement, concealing property, or obtaining money or property by fraud in connection ines up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Madhupriya Dontha	
Madhupriya Dontha Signature of Debtor 1	Signature of Debtor 2
Date January 2, 2018	Date
	ur Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
□ Yes	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 44 of 54

Fill in this inform	nation to identify you			
	iation to identity you	ur case:		
Debtor 1	Madhupriya Do	ntha		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS	
Case number(if known)				☐ Check if this is an amended filing
Official For		on for Individ	luals Filing Under Chapte	er 7 12/15
you have lease You must file this whicher on the f	s form with the cour ver is earlier, unless orm	y and the lease has not e t within 30 days after you	xpired. I file your bankruptcy petition or by the date s ne for cause. You must also send copies to th	
sign and Be as complete a write yo	d date the form. Ind accurate as possour name and case r	sible. If more space is ne	re equally responsible for supplying correct i	
Be as complete a write yo	d date the form. Ind accurate as possible rame and case report Creditors Who Hors that you listed in	sible. If more space is ne number (if known). ave Secured Claims		the top of any additional pages,
Be as complete a write you Part 1: List You 1. For any creditor information be	d date the form. Ind accurate as possible rame and case report Creditors Who Hors that you listed in	sible. If more space is nenumber (if known). ave Secured Claims Part 1 of Schedule D: Cr	eded, attach a separate sheet to this form. On	the top of any additional pages, y (Official Form 106D), fill in the

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

Description of

securing debt:

name:

property

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

□ No

☐ Yes

☐ No

Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 45 of 54

Debtor 1	Madhupriya Dontha	Case number (if known)		
name:		Retain the property and redeem it.	☐ Yes	
Descrip	otion of	Retain the property and enter into a		
propert		Reaffirmation Agreement. Retain the property and [explain]:		
securing debt:		— Retain the property and [explain].		
Part 2:	List Your Unexpired Personal Property	/ 0200		
For any u	nexpired personal property lease that y ormation below. Do not list real estate le	you listed in Schedule G: Executory Contracts and Unex eases. Unexpired leases are leases that are still in effect y lease if the trustee does not assume it. 11 U.S.C. § 365	; the lease period has not yet ended.	
Describe	your unexpired personal property leas	es	Will the lease be assumed?	
Lessor's r			□ No	
Description Property:	on of leased		☐ Yes	
Lessor's r			□ No	
Description Property:	on of leased		☐ Yes	
Lessor's r			□ No	
Description Property:	on of leased		☐ Yes	
Lessor's r			□ No	
Property:	on of leased		☐ Yes	
Lessor's r			□ No	
Property:	on of leased		☐ Yes	
Lessor's r			□ No	
Property:	on of leased		☐ Yes	
Lessor's r			□ No	
Property:	on of leased		☐ Yes	
Part 3:	Sign Below			
	nalty of perjury, I declare that I have ind hat is subject to an unexpired lease.	licated my intention about any property of my estate tha	t secures a debt and any personal	
	Madhupriya Dontha	X Signature of Debtor 2		
	Ihupriya Dontha ature of Debtor 1	Signature of Debtor 2		
Date	January 2, 2018	Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-00045 Doc 1 Filed 01/02/18 Entered 01/02/18 16:45:56 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Madhupriya Dontha		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due			1,500.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed competent	nsation with any other person	unless they are mem	bers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				/ law firm. A
5.	In return for the above-disclosed fee, I have agreed to rene	der legal service for all aspect	ts of the bankruptcy	case, including:	
t c	a. Analysis of the debtor's financial situation, and renderib. Preparation and filing of any petition, schedules, stater Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Negotiations with secured creditors to rereaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on house	ment of affairs and plan which s and confirmation hearing, and duce to market value; exc as as needed; preparation	n may be required; and any adjourned hea emption planning;	rings thereof;	d filing of
6. I	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any discrete any other adversary proceeding.			es, relief from st	ay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the	e debtor(s) in
Ja	anuary 2, 2018	/s/ Gregory J. Ma	rtucci		
\overline{D}	ate	Gregory J. Martu			
		Signature of Attorne Law Office of Gre	ay Egory J. Martucci,	P.C.	
		203 E. Irving Parl	k Rd.		
		Roselle, IL 60172			
		Name of law firm			

United States Bankruptcy Court Northern District of Illinois

In re	Madhupriya Dontha		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	ΓRIX	
		Number of Cr	reditors: _	27
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors	s is true and	correct to the best of my
Date:	January 2, 2018	/s/ Madhupriya Dontha Madhupriya Dontha Signature of Debtor		

American Express P.O. Box 0001 Los Angeles, CA 90096

Bank of America P.O. Box 15019 Wilmington, DE 19886

Blitt & Gaines, P.C. 661 Glenn Ave. Wheeling, IL 60090

Bloomingdalen Fire Protection Disctrict No. 1 P.O. Bo 457 Wheeling, IL 60090

Capital One Bank P.O. Box 30281 Salt Lake City, UT 84130

Chase Bank P.O. Box 15298 Wilmington, DE 19850

Discover P.O. Box 6103 Carol Stream, IL 60197

DuPage County Collector 421 N. County Farm Road Wheaton, IL 60187

DuPage Medical Group 15921 Collections Center Drive Chicago, IL 60693

Healthlab P.O. Box 4090 Carol Stream, IL 60197

Illinois Department of Revenue P.O. Box 64338 Chicago, IL 60664

IRS
Mail Stop 5014CHI
230 S. Dearborn Street, Room 2600
Chicago, IL 60604

Kurstufek & Associates 1121 Warren Ave., Ste. 210 Downers Grove, IL 60515

Law Office of Trent & Butcher 350 S. Schmale Rd #130 Carol Stream, IL 60188

McCalla Raymer Leibert Pierce, LLC 1 N. Dearborn St., Ste. 1200 Chicago, IL 60602

Mevorah Law Office 134 N. Bloomingdale Road Bloomingdale, IL 60108

Michael R. Konewko 29 W. 204 Roosevelt Road West Chicago, IL 60185

Miramed Revenue Group 991 Oak Creek Dr. Lombard, IL 60148

Northwestern Medicine P.O. Box 4090 Carol Stream, IL 60197

Pierce & Associates 1 N. Dearborn, Ste. 1300 Chicago, IL 60602

Prasantha Dontha 1188 Burnham Street Carol Stream, IL 60188

Prasantha K. Dontha 1188 Burnham Street Carol Stream, IL 60188 Ray Ramos 1529 Allen Lan e Saint Charles, IL 60174

State Collection Service, Inc. 2509 S. Stoughton Road Madison, WI 53716

Suburban Radiologists S.C. 1446 Momentum Place Chicago, IL 60689

Wells Fargo Home Mortgage P.O. Box 5296 Carol Stream, IL 60197

Winfield Laboratory Consultants. SC Dept. 4408 Carol Stream, IL 60122